IMPLEMENTATION OF WELLNESS PROGRAMS IN COMBINATION DEPARTMENTS

STRATEGIC MANAGEMENT OF CHANGE

By: Frank G. Benak Chief Western Springs Department of Fire and EMS Illinois

An applied research project submitted to the National Fire Academy as part of the Executive Fire Officer Program

ABSTRACT

The leadership of the Western Springs Department of Fire and EMS recognizes that wellness programs and physical fitness play an important role in an employee's overall performance and well being.

The purpose of this applied research project was to identify the factors that will improve the wellness and physical fitness of its personnel as well as to develop a mechanism to implement these factors within the Western Springs Department of Fire and EMS. Historical, descriptive as well as evaluative research were utilized to answer the following questions: 1. Identify the components of a wellness program that meet the intent of NFPA 1500 and other accepted standards. 2. What steps have other fire departments, similar in makeup, taken to implement a wellness program. 3. What alternatives may the Western Springs Department of Fire and EMS employ to meet accepted wellness standards.

The use of historical research in the form of literature search and review was utilized to identify the components of a wellness program that would meet the intent of NFPA 1500. The information gathered was based upon fire service periodicals, National Fire Academy research papers, and texts related to this subject.

Descriptive research in the form of a survey instrument sent to 176 Illinois fire departments was utilized to determine what actions other combination fire departments have taken to implement a wellness program. Descriptive research in the form of an interview was utilized to determine the factors affecting participation in wellness/physical fitness activities by current Western Springs of Fire and EMS personnel.

The literature review indicated that medical, fitness, medical/fitness rehabilitation, behavioral health and data collection and reporting are the components of a wellness program that meet the intent of NFPA 1500 and other accepted standards –research question 1.

Surveys indicated the following steps taken by other fire departments (research question 2): annual physical, fitness evaluation, health awareness program, employee assistance program, and combat challenge.

Alternatives (research question 3) reported included equipment purchases, fitness committees and peer pressure, use of equipment while on duty, annual physicals at employer expense, and use of exercise facilities by spouses. Fifty-nine percent of those responding to the survey indicated that their department did not have a fitness/wellness program in place. Interviews with Western Springs Fire and EMS personnel indicated that approximately 20% of the department's membership utilized the in station exercise equipment, the majority being full-time firefighter/paramedics. Time, family demands, other priorities and lack of interest were reasons often cited by those who did not workout.

It was recommended that the NFPA 1500 requirements and the IAFF Joint

Initiative proposal be viewed in terms of the department's mission and culture. Develop
a team approach to implement a pilot program based on these guidelines to address fulltime and paid on call issues. Based upon previous department with change
implementation, it is possible over time to address this issue.

TABLE OF CONTENTS

ABSTRACT	i
TABLE OF CONTENTS	iii
INTRODUCTION	1
BACKGROUND AND SIGNIFICANCE	2
LITERATURE REVIEW	5
PROCEDURES	10
RESULTS	
DISCUSSION	17
RECOMMENDATIONS	19
REFERENCES	22
APPENDIX A	25

INTRODUCTION

The leadership of the Western Springs Department of Fire and EMS recognizes that wellness programs and physical fitness play an important role in an employee's overall performance and well being.

The purpose of this applied research project was to identify the factors that will improve the wellness and physical fitness of its personnel as well as to develop a mechanism to implement these factors within the Western Springs Department of Fire and EMS.

Historical, descriptive as well as evaluative research were utilized to answer the following questions:

- Identify the components of a wellness program that meet the intent of NFPA 1500 and other accepted standards.
- 2. What steps have other fire departments, similar in makeup, taken to implement a wellness program.
- What alternatives may the Western Springs Department of Fire and EMS employ to meet accepted wellness standards.

BACKGROUND AND SIGNIFICANCE

It has long been recognized that fire fighting and related activities are physically demanding and injury prone.

The IAFF Death and Injury Survey demonstrates that fire fighting remains one of the most dangerous occupations in the United States. Research has repeatedly shown the need for high levels of fitness to perform safely in the fire service. The firefighter's long hours, shift work, sporadic high intensity work, strong emotional involvement, and exposure to human suffering places fire fighting among the most stressful occupations in the world. High levels of stress, intense physical demands and long exposure to chemicals and infectious disease contribute to heart disease and cancer – the three leading causes of death and occupational disease disability (IAFF, 1997, p. 3).

Society in general and now the fire service in particular have encouraged life styles or life style changes that foster wellness of mind and body. The National Fire Protection Association's (NFPA) Pamphlet 1500 states: "the fire department shall provide a member assistance program that identifies and assists members and their immediate families with substance abuse, stress, and personal problems that adversely affect fire department work performance". NFPA 1500 further states that "the wellness program shall provide health promotion activities that identify physical and mental health risk factors and shall provide education and counseling for the purpose of preventing health problems and enhancing overall well-being". Finally, 1500 mandates the fire department to "establish and provide a physical fitness program to enable members to

develop and maintain an appropriate level of fitness to safely perform their assigned functions" (NFPA 1500, 1997, pp. 21-22).

The Village of Western Springs currently employs 62 full-time and approximately 40 part-time employees. Village services include police, fire, emergency medical, code enforcement, public works, streets, forestry, and water production as well as a comprehensive recreation program including daycare.

Prior to 1979, the delivery of fire and ambulance services, with the exception of a full-time chief, was provided by a totally volunteer or paid on call force. A paramedic program utilizing on call "volunteer" personnel and a single full-time daytime paramedic (in station) was initiated in the fall of 1979. Over time additional full-time personnel as well as a limited sleep-in program were utilized to maintain the integrity of the program.

Presently the department is staffed by a chief, duty shift of two firefighter paramedics, 24 hours per day, a daytime supervisor (deputy chief) and one paid-on-call sleep-in and approximately 40 paid on call personnel including a full compliment of paid on call officers. The department participates in an area wide mutual aid program as well as automatic initial fire response with neighboring full time departments. All paid on call personnel are paged out for all fire incidents with the exception of trouble alarms.

Individuals with EMT or paramedic level training are paged out to assist the two on duty paramedics on EMS incidents. In addition to fire suppression and EMS, the department provides an active public education program consisting of in school activities, station tours and CPR training. These activities coupled with an increased service level from less than 300 incidents in 1975 to almost 1200 in 1997.

The mission of the Western Springs Department of Fire and EMS, to insure the preparation of personnel and equipment to a state of readiness in order to provide a range of cost effective programs designed to protect the lives and property of the inhabitants of the Village of Western Springs from the adverse effects of fire, medical emergencies or exposure to dangerous conditions created by man or nature, requires that appropriate change or actions be taken to maintain the department's viability.

Department personnel, full-time and paid on call, are trained in accordance with state standards and certification levels. Apparatus, equipment and turnout gear are state of the art. Full and part-time fire personnel receive pre-employment physical examinations and annual medical screenings to comply with current respirator standards. All personnel on a biannual basis require vision and auditory screenings.

The Village Personnel Policies and Procedures Manual provides for an employee assistance program whose primary objective is "to provide troubled employees with confidential, convenient, no-cost opportunity to solve personnel problems independently and at an early stage, before they lead to more serious difficulties" (p. 22).

As a result of the increased workload and modification of patterns, the Village approved and completed a major renovation of the existing firehouse/code enforcement complex. Included in this renovation were expanded living quarters and the inclusion of an exercise/workout room. The department's fire and rescue association in conjunction with the Village purchased and installed a treadmill and 10 Nautilus workout machines. Present policy provides for voluntary exercise by full time and part time or paid on call members of the department. Currently a limited number of duty and on call personnel utilizes the equipment.

The Executive Fire Officers Program requires the submittal of an applied research project relevant to one's field of study. The Strategic Management of Change Course of the Executive Fire Officers Program focuses on the development and application of the change management model.

LITERATURE REVIEW

Today as never before, the issues of fitness and well being are dominant in our society. Advertisements for almost all aspects of life key into a mania for health and fitness. Many households own one or more pieces of fitness equipment. Yet the National Institutes of Health and the American Heart Association have recently added obesity to the list of major risk factors for heart attack and heart disease and have found that an increasing proportion of the nation's population is overweight (Pi-Sunyer, 1998).

Recognizing these facts, employers as promoters of wellness programs, encourage healthy lifestyles for employees as a mechanism to prevent illness and injuries. Physical exercise is an important component of wellness programs but successful programs also include other health issues including stress and nutrition. Employee wellness programs typically include three components: physical fitness, health awareness and education, and an employee assistance program (Schirack, 1988).

For the purposes of this research paper fitness is defined as the ability to perform daily tasks and maintain sufficient reserve to respond to unforeseen emergencies (Institute of Human Performance, 1991). The Joint Labor Management Wellness Fitness Initiative concurs stating that "wellness programs in the fire department are intended to strengthen uniformed personnel so that their mental, physical, and emotional capabilities

are resilient enough to withstand the stresses and strains of life and the workplace" (IAFF, 1997, p. 2). The Initiative views a wellness program as a total commitment to the health, safety and longevity of personnel, the productivity and performance of fire crews and the cost effectiveness and welfare of fire departments.

Although the Western Springs Department of Fire and Emergency Medical Services has not formally adopted the NFPA 1500 – Standard on Fire Department Occupational Safety and Health Program, it has recognized its importance as national consensus standard. The Department has, since the standard's inception, consciously attempted to implement or subscribe to most of its requirements. The Physical Fitness requirement of Chapter 8 has proven to be the most troublesome in this combination fire department.

A review of the literature suggests the obvious – firefighting consists of physical activities that are often strenuous, often dangerous, difficult and physically fit firefighters are less prone to injury and time off the job. Unfortunately the fire service often connotes a history of poor physical training and eating habits (McCory, 1996).

The Stillwater Oklahoma Fire Department (OSU Wellness Center Staff, 1998) identified the following goals for their wellness program:

- 1. Improve the fitness of all fire department employees.
- 2. Reduce injuries both on and off the job.
- 3. Reduce workers' compensation claims and expenses.
- 4. Provide overall cost savings for the City.
- 5. Save the citizens tax dollars.
- 6. Increase morale.

- 7. Achieve 100 percent voluntary participation.
- 8. Provide better customer service.

The goals identified above are consistent with Davis (1996) who believes that fire department fitness programs should achieve the following:

- 1. Enhancement of employee health.
- 2. Improvement of employee productivity.
- 3. Improvement of employee morale.

Most fire service administrators recognize the importance of fitness and well being just as they recognize the importance of other fire services factors such as employee benefits, adequate staffing or appropriate equipment purchases. Yet organizationally, departments are often unwilling to commit to a fitness program.

Successful programs require total management support, employee buy-in, education and the establishment of an incentive and reward structure (Lepere, 1997). Yellstrom, (1995) cites management commitment, employee involvement and periodic audits as keys to establishing effective safety and health programs.

Williamson (1995) in a survey of 48 fire departments within the state of Kansas found that nearly 80% of the respondents indicated that their department supplied equipment and facilities for a physical fitness program. However these same respondents indicated that their department did not require annual physical agility testing.

Williamson concluded that some type of annual evaluation should be implemented to achieve program success.

Kluck (1995) in a survey of 51 fire departments found that 60% of the departments surveyed has some form of fitness or wellness program. Of these 60% of the

programs were voluntary in nature. The departments with voluntary programs had a participation level of approximately 75%. Kluck concluded that establishment of a fitness/wellness program if even voluntary in nature will create a healthier workforce and perhaps reduce work-related injury and sickness.

However, Lechner and DeVries (1995) indicated that studies show "that about 30% of employees within an organization will actually start participating when a (fitness) program is offered to them. Furthermore, studies show that 3 to 6 months after the start, only 50-60% of the original participating in the program" (p. 429).

Schirack (1988) suggests that municipal fitness programs include physical fitness, health awareness and education as well as employee assistance programs. Almost ten years later the Joint Labor Management Wellness Fitness Initiative proposes a comprehensive model that is made of five principal components:

- Medical annual exam, job specific for uniformed personnel, including physical evaluation, body composition, laboratory tests, vision testing, hearing evaluation, spirometry, EKG, cancer screening immunizations and infectious disease screening, referrals and data collection.
- Fitness includes medical clearance, on duty time for exercise, equipment and
 facilities, exercise specialists and peer trainers, incorporation of fitness into the
 fire service philosophy, fitness evaluations of aerobic capacity, flexibility,
 muscular strength and endurance, fitness self assessments and exercise
 prescriptions.
- Medical/fitness Rehabilitation establishes a need and priority for rehabilitation,
 develops program criteria, provides for a fire department medical liaison, provides

- for physical therapy services, clinical pathway rehabilitation (standardized approaches to treatment, provide alternative duty programs and establishes an injury prevention program.
- 4. Behavior Health includes professional and coordinated assistance, marketing of health services, tobacco use cessation, employee or member assistance programs, substance abuse interventions, stress management, critical incident stress management, comprehensive counseling services and chaplain services for spiritual needs.
- 5. Data Collection and Reporting establishes a mechanism for participating fire departments to compile data, develops a data dictionary, transfer specifications and the International Wellness/ Fitness Database (IAFF, 1997, pp. 9-107).

While the NFPA standard and the IAFF initiative stress the importance of fitness/wellness programs for all personnel, combination/volunteer departments are facing governmental regulation and training demands that place a heavy burden on someone who wishes to give of his/her time, the volunteer or paid on call firefighter.

Additionally, the fire service, in these situations, is competing with service clubs, church groups, soccer, family life and other worthwhile organizations for a precious commodity free time. Palmer (1994) in a survey of volunteer firefighters found strong resistance to the concept of mandatory physical fitness programs.

The literature indicates that wellness is an important facet of the fire service, but implementation is not without its pitfalls. Without proper planning, communication, and a feeling of ownership, a successful outcome is in doubt.

PROCEDURES

Research Method

The desired outcome of this research project was to identify the components of a wellness program that will meet the intent of NFPA 1500 and other accepted standards as well as the implementation steps taken by other departments that would apply to Western Springs Fire and Emergency Medical Services.

The use of historical research in the form of literature search and review was utilized to identify was to identify the components of a wellness program that would meet the intent of NFPA 1500. The information gathered was based upon fire service periodicals, National Fire Academy research papers, and texts related to this subject.

Descriptive research in the form of a survey instrument was utilized to determine what actions other combination fire departments have taken to implement a wellness program. A sample of the survey is in Appendix A.

Descriptive research in the form of an interview was utilized to determine the factors affecting participation in wellness/physical fitness activities by current Western Springs of Fire and EMS personnel.

Survey Population

A listing of fire departments within the state of Illinois was obtained from the Illinois Fire Chiefs Association. Utilizing a table of random numbers, 200 chiefs of department were selected for this survey. Prior to mailing, departments known to be full time, e.g. City of Chicago, were deleted from the sample. Of the 176 surveys sent out on June 1, 1998, 108 were returned before the cut off date of July 15, 1998.

Interview Population

It was assumed that all paid on call members of the Western Springs Department of Fire and EMS would have an opportunity to participate in the interview process by speaking with the paid on call leadership of the department.

Instrumentation

A ten question survey was prepared to gather responses from the sample.

Question four was designed to identify departments that currently have a wellness/fitness program Question three was designed to identify the responses of combination departments. Question five was designed to answer Research Question 2. "What steps have other fire departments, similar in makeup, taken to implement a wellness program?" Question six sought to determine the level of participation and address the paid on call question. Question seven sought to determine the nature or "reachability" of a department's wellness/fitness program. Question eight was designed to answer Research Question 3. "What alternatives may the Western Springs Department of Fire and EMS employ to meet accepted wellness standards?" Question ten attempted to assess the overall effect of the program.

Assumptions and Limitations

It was assumed that all survey responses were truthful and that the respondents understood the survey questions. Additionally, it was assumed that the responses elicited during the interview process were also truthful and freely given.

It was the author's intention to obtain survey responses from a representative sample of Illinois combination departments. It was assumed that 200 responses or 17% of all Illinois fire departments would provide a base for meaningful data. One hundred

and seventy-six surveys were mailed; twenty-four of the 200 were eliminated, as they were known to be full time. Of the 86 surveys that were returned, 36 had established some form of fitness/wellness program. Of the 36 departments having fitness/wellness program, 30 utilized some form of paid on call or part-time personnel. It was assumed that these thirty responses would be applicable to the Western Springs Department of Fire and EMS.

RESULTS

Answers to Research Questions

Research Question 1. Identify the components of a wellness program that meet the intent of the NFPA 1500 standards and other accepted standards. Literature research identified the following factors as typical components of health/ wellness programs: physical fitness, health awareness and education, and employee assistance program (Schirack, 1988).

Kluck (1995) in a survey of 51 fire departments found cardiovascular fitness, muscular fitness, nutrition, substance, stress management, maintaining wellness, weight control and flexibility to be key components of fire department fitness/wellness programs.

As outlined in the literature review, the Joint Labor Management Wellness Fitness Initiative is a comprehensive look at the fitness question in the fire service. This comprehensive model proposes five principal components:

A. Medical - annual exam, job specific for uniformed personnel, including physical evaluation, body composition, laboratory tests, vision testing, hearing evaluation,

- spirometry, EKG, cancer screening immunizations and infectious disease screening, referrals and data collection.
- B. Fitness includes medical clearance, on duty time for exercise, equipment and facilities, exercise specialists and peer trainers, incorporation of fitness into the fire service philosophy, fitness evaluations of aerobic capacity, flexibility, muscular strength and endurance, fitness self assessments and exercise prescriptions.
- C. Medical/Fitness Rehabilitation establishes a need and priority for rehabilitation, develops program criteria, provides for a fire department medical liaison, provides for physical therapy services, clinical pathway rehabilitation (standardized approaches to treatment, provide alternative duty programs and establishes an injury prevention program.
- D. Behavior Health includes professional and coordinated assistance, marketing of health services, tobacco use cessation, employee or member assistance programs, substance abuse interventions, stress management, critical incident stress management, comprehensive counseling services and chaplain services for spiritual needs.
- E. Data Collection and Reporting establishes a mechanism for participating fire departments to compile data, develops a data dictionary, transfer specifications and the International Wellness/ Fitness Database. (IAFF, 1997, pp. 9-107).
 This model is consistent with Kluck, Schirack and others.

Research Question 2. What steps have other fire departments, similar in makeup, taken to implement a wellness program. Descriptive research in the form of survey

question five was utilized to answer this question. Of the 30 applicable surveys, 28 respondents provided one or components of their fitness/wellness program.

- A. Annual Physical. Ten responses indicated the use of annual physical examinations as a part of the department's physical fitness/wellness program.
- B. Fitness Evaluation. Thirteen responses indicated the use of annual fitness evaluation as a part of the department's physical fitness/wellness program.
- C. Workout on Duty. Twenty-three responses indicated the approved use of departmental exercise equipment while on duty.
- D. Health Awareness Program. Seven responses provided for a health awareness program that included stress reduction, fitness education and nutrition improvement.
- E. Employee Assistance Program. Four responses listed an employee assistance program as a part of the department's physical fitness/wellness program.
- F. Combat Challenge. Six responses listed the combat challenge or combat challenge type of activity as a part of the department's physical fitness/wellness program.

Additionally, health club memberships, "self-directed programs", use of exercise facilities while off duty, and awards for participation were also mentioned as components of a part of a department's physical fitness/wellness program.

Survey question six sought to determine the level of participation. Of the 30 responses citing the establishment of wellness/fitness program in combination

departments, twenty-one indicated that the wellness/fitness program was provided for all personnel and nine indicated that their department's program was only for full-time personnel.

Survey question seven sought to determine the nature or "reachability" of a department's wellness/fitness program. Nineteen of the thirty respondents indicated that their department's fitness/wellness was voluntary, while eleven indicated that the program was mandatory.

Research Question 3. What alternatives may the Western Springs Department of Fire and EMS employ to meet accepted wellness standards? Interviews with Western Springs Fire and EMS personnel indicated that approximately 20% of the department's membership utilized the in station exercise equipment, the majority being full-time firefighter/paramedics. Time, family demands, other priorities and lack of interest were reasons often cited by those who did not workout. These responses are consistent with Kenny (1996) in reviewing factors influencing the decline of the paid on call component in his long standing combination department cited training, family responsibilities, recruitment and retention and concluded that his department's paid on call program may no longer be viable.

Responses to survey question eight identified the steps taken to improve participation in voluntary physical fitness/wellness programs. Nineteen respondents provided one or more of the following:

A. Equipment purchases. Five responses indicated providing the equipment improved participation.

- B. Fitness committees and peer pressure. Four responses cited the establishment of committees to provide goals and objectives as well as the use of peer pressure as a means to improve participation.
- Use of exercise equipment while on duty. Seven responses indicated that the workouts on duty had improved participation.
- D. Annual physicals at employer expense. Seven responses cited that providing annual physicals had improved participation.
- E. Use of facilities by spouses, discounted health club memberships, weight loss programs and other incentive base programs were also individually cited as methods of improving participation.

While recognizing the fitness/wellness programs are important, survey question ten sought to determine if there was any benefit to the department in terms of sick days or injury reduction. Of the thirty respondents with fitness/wellness programs, fourteen indicated fewer sick days and or injury reduction. Seven stated that their fitness/wellness programs had little or no effect on sick day use and or injury reduction. Nine respondents indicated that they were unable to determine any effects. Antidotal information gathered from this question listed cases of smoking cessation, improved morale, weight loss and an increased level of preparedness as additional benefits of fitness/wellness programs.

Finally, of the fourteen respondents indicating fewer sick days and or injury reduction, nine respondents had mandatory programs and five had voluntary programs.

DISCUSSION

The purpose of this applied research project was to identify the factors that will improve the wellness and physical fitness of its personnel as well as to develop methodology to implement these factors within the Western Springs Department of Fire and EMS. The literature review and survey data have provided sufficient information for our leadership staff to examine our policies regarding wellness and draft new proposals. Clearly the Fire Service Joint Labor Management Wellness/Fitness Initiative (1997) provides a complete blueprint to meet the NFPA's Standard on fire department occupational safety and health requirements for physical fitness. Most if not all the components of the program – medical, fitness, rehabilitation, behavioral, health and data collection could be implemented on an incremental basis. The components identified in the surveys - annual physical, fitness evaluation, the ability to exercise while on duty, implementation of a health awareness program, and an employee assistance program are consistent with the Joint Initiative model.

It is quite surprising that 50 of eighty-six departments, 59%, did not have any form of a wellness/fitness program in place. Considering the wide array of activities or skills that were listed in the surveys as wellness/fitness components, the number of respondents without any form of program is even more staggering.

Currently the Western Springs Department of Fire and Emergency Medical Services provides/requires pre-employment medical examinations, annual medical screenings, biannual auditory and vision testing, provides an employee assistance program and voluntary use of exercise facilities. These programs are consistent with the survey data and Joint Initiative model.

Regulatory bodies including OSHA and the NFPA have increased initial and inservice training requirements for practically all aspects of the fire service. While these requirements create a safer environment for today's firefighter, they also require a greater commitment from today's paid on call or volunteer firefighter (Mallory 1990).

Walterhouse (1996, p. 4) contends that "physical fitness programs, to achieve the desired benefits must be mandatory and not voluntary." While mandatory participation in all aspects of a fitness/wellness program can be required of full-time employees, it cannot be realistically required of paid on call or volunteer personnel.

Antidotal information gathered in survey question ten listed cases of smoking cessation, improved morale, weight loss and an increased level of preparedness as additional benefits of fitness/wellness programs. It is benefits such as these taken with implementation steps cited in survey question eight: participation in equipment purchases, establishment of fitness committees and peer pressure, use of exercise equipment while on duty, and annual physicals, may be utilized as marketing tools. Use of facilities by spouses, discounted health club memberships, weight loss programs and other incentive base programs were also individually cited as methods of improving participation. The literature and survey data indicate those comprehensive fitness/wellness programs in most cases have positive results. Davis (1997) cites proper budgeting, realistic policies, leadership, and an effective committee structure, outside resources and effective screening programs as means to implement an effective fitness program.

The components identified in the literature and survey data strongly suggest a program that is far more reaching that a simple exercise or weight room. The program

must include other health-related issues such as nutrition, stress reduction and employee assistance. Requiring paid on call or volunteer firefighters to participate in workout periods or classes is probably not realistic given the time demands previously cited. It does appear however the Western Springs Department of Fire and Emergency Medical Services already has in place some of the components of a model program – physicals, employee assistance, annual medical screening and provisions for fitness workouts.

Recognizing that fit employees are more effective, safer, and possibly cost less in terms of sickness and injury, it is now the task of our department to view wellness in terms of a comprehensive goal oriented program rather than a series of independent activities or tasks. Clearly, the problem and the solutions provided by the literature and surveys need to be viewed in terms of organizational change. Chang (1994) cites eight steps to organizational change – diagnosis, process selection, management commitment, enlist technological support, improvement team with a qualified facilitator, pilot program, implementation, and recylcing the lessons learned. These steps and components identified in the literature and survey data provide a mechanism for our department to achieve a reasonable degree of compliance with the NFPA 1500 wellness provisions.

RECOMMENDATIONS

The data collected in this research project indicates that wellness may be viewed as an important issue in the literature, as substantial number of Illinois fire departments have yet to address the issue. Given that society in general and recognized leaders of the fire service in particular have encouraged life styles or life style changes that foster wellness of mind and body, fire departments in this area need to move forward on the issue of fitness.

The Western Springs Department of Fire and Emergency Medical Services utilizing a form of the National Fire Academy's change model can and should implement a goal oriented program.

- A. Included in this process is an analysis of the NFPA requirements and the Joint Initiative proposal. These requirements should be viewed or compared with the department's mission and existing culture.
- B. Development of a team to determine impact, address full-time and paid on call issues and provide a blueprint to follow. A review of the implementation techniques provided by the survey data may assist in determining the department's program. Additionally, it might be helpful to contact those departments with successful programs for additional input.
- C. Implement and market a reward based pilot program that includes paid on call and full-time components. This program should include incentives and innovative approaches. The surveys indicated that some departments permit or encourage the use of fitness facilities by member's spouses.
 This is currently prohibited in Western Springs. This type of accommodation along with other incentives may help to attain a successful program.
- D. Expand the program, document successes and failures, and modify as necessary. Currently the department is seeing about a 10% annual turnover of paid on call personnel. While this rate of turnover necessitates constant training in all technical areas, it may help reduce the resistance to

change. During the past year a voluntary in station sleep-in program was instituted. Also, fourteen new paid on call members were recently hired. These new members overshadowed the resistance to this program by long time personnel.

The author believes that the Western Springs Department of Fire and Emergency Medical Services can implement a meaningful wellness/fitness program. It is incumbent upon the department's leadership to recognize those factors that will determine success or failure. It is also clear that all members to some extent have stake in the process.

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APPENDIX A

PLEASE COMPLETE THE FOLLOWING SURVEY. IT IS INTENDED TO BE ANONYMOUS.

1.	Service Area	a. b.	less than 5 sq. mi. 5-10 sq. mi.		
		c.	10-20 sq. mi.		
		d.	greater than 20 sq. mi.		
2.	Population	a.	less than 10,000		
	-	b.	10,001 - 15,000		
		c.	15,001 - 25,000		
		d.	25,001 - 35000		
		e.	greater than 35,000		
3.	Does your Dep	artment	utilize paid on call or volunteer personnel?	es	No
NFPA 1500 states: "The fire department shall establish and provide a physical fitness program to enable members to develop and maintain an appropriate level of fitness to safely perform their assigned functions. The maintenance of fitness levels specified in the program shall be based on fitness standards determined by the fire department physician that reflect the individual's assigned functions and activities and that are intended to reduce the probability and severity of occupational injuries and illnesses."					
4.	Has your depart	rtment e	established a physical fitness program? Yes No		
If you a	answered yes to	question	n 4, please complete the following:		
5.	Briefly describ	e the pro	ogram's components		
	<i>y</i>	r			

6.	Indicate level of participation: all personnel full-time personnel other
	If you answered "other" please explain
7.	Is the program mandatory or voluntary ?
8.	If the program is voluntary, what steps have you taken to improve participation in your fitness program?
•	
9.	Have these steps improved participation Yes No
10.	In terms of injury or sickness, what has been the overall effect of the program on your department?
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